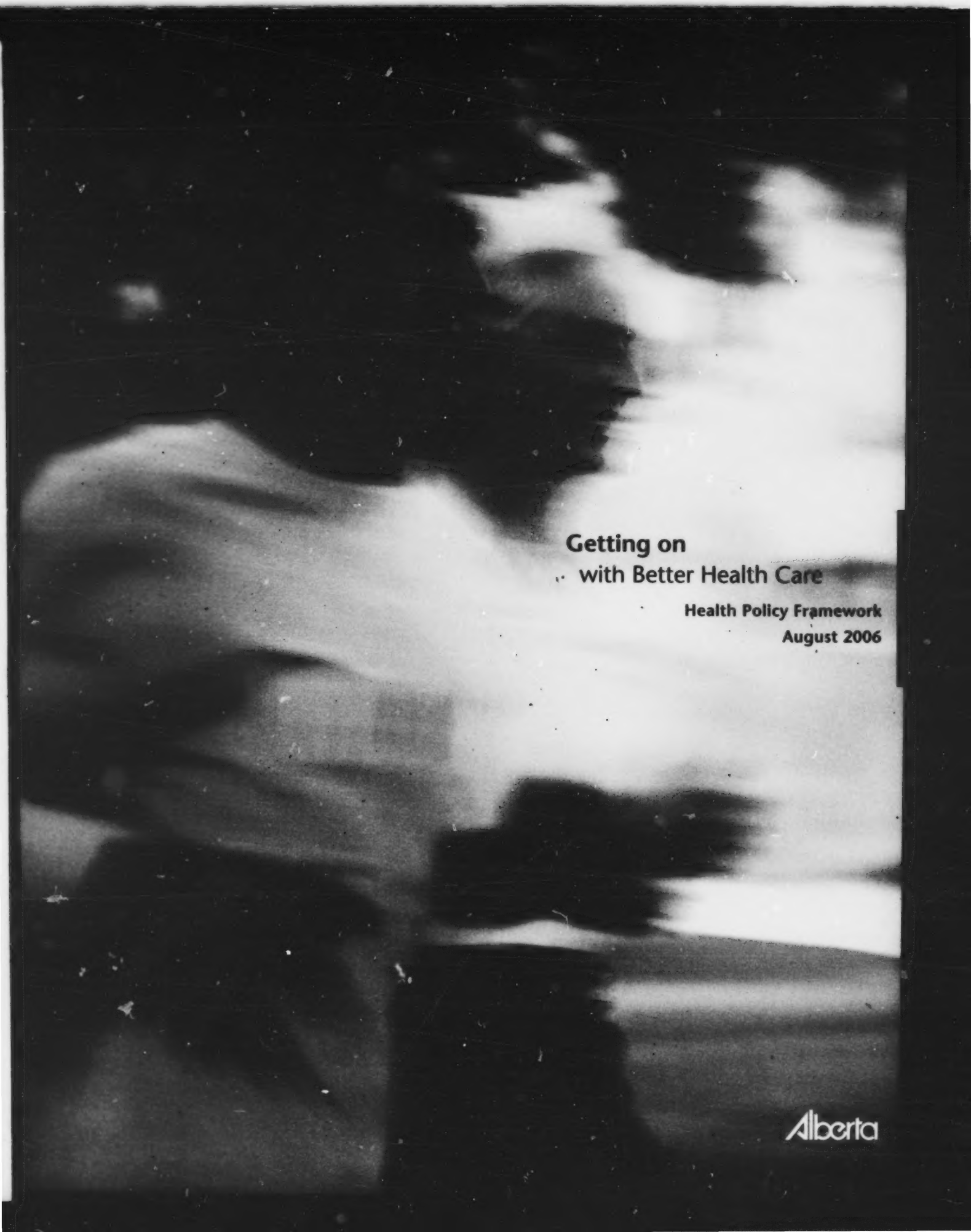

Getting on with Better Health Care

Health Policy Framework

August 2006

Alberta

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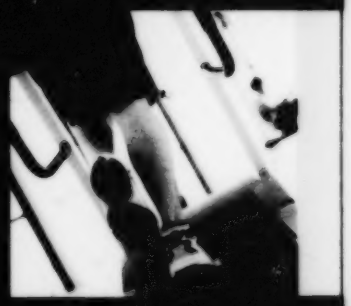
PRIORITIES FOR ACTION

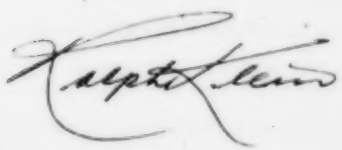
This Health Policy Framework is designed to shape future policy decisions by providing clear and consistent direction based on the goals, values and expectations of Albertans. It continues the *Getting on with Better Health Care* action items that were launched by the Alberta Government in July 2005. The combination of decisive action and strategic thinking creates the drive and momentum necessary for positive change.



These policy directions and the action items in the *Getting on with Better Health Care* package fall within three priority areas: *Managing the Health System Better, Promoting Lifelong Health* and *Encouraging Innovation.* Decisive action in each of these priority areas is fundamental to building a sustainable, flexible and robust health system that Albertans can count on to serve their needs today and long into the future.

MESSAGE FROM THE PREMIER OF ALBERTA

Health care is a top priority for Albertans. As we look to the future, we know human and fiscal resources will continue to be an immense challenge to health care sustainability. This revised Health Policy Framework is a step in the right direction.



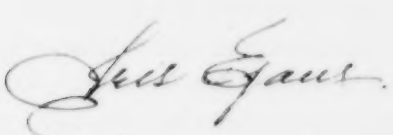
Premier Ralph Klein

MESSAGE FROM THE MINISTER

We have listened to Albertans. The Health Policy Framework has been revised to reflect the values, beliefs and expectations of Albertans. Our ultimate goal is for all Albertans to achieve and maintain optimal health. We are on a journey.

We need to continue to build a strong, responsive and accessible health system for Albertans today, and into the future.

We also need to recognize the role that the health system plays in contributing to the economic and social wellbeing of urban and rural communities and residents throughout the province. Seventy per cent of health system costs are for salaries and benefits of employees in the health system which, as a sector, is one of the largest employers in Alberta. It is important to make sure that our future investments in health services not only result in better health outcomes, but also continue to contribute positively to our economic prosperity.



Health and Wellness Minister Iris Evans

INTRODUCTION

Alberta has come a long way in developing publicly funded health care in this province. In common with other Canadians, Albertans value a universal, publicly funded health system. They understand that high quality, accessible health care is expensive and consumes a large proportion of their tax dollars. At the same time, Albertans appreciate the peace of mind that comes from not having to worry about paying directly for medical and hospital treatment if they should ever need it. They do not want to go back to the times before Medicare when ordinary people worried a great deal about the financial consequences if they or a family member ever became ill or injured.

In charting a course for the future, it is important to begin by understanding where we are today and to know the highlights of the journey taken thus far. In Alberta between 1940 and 1969, there were a number of private or employer-based health insurance plans which offered some protection to subscribers for health services such as medical, surgical and obstetrical care. Generally people did not think the government was responsible for paying for all of their health care needs. Universal health care insurance was first introduced into Alberta in 1969 when the *Alberta Health Care Insurance Act* was passed. Since then, Albertans have come to expect the public system to take care of the majority of their health needs throughout their lives. Many believe that it is government's duty to provide all services and benefits needed to support their health. These expectations, combined with population changes, have led people to recognize that the health system is becoming overstretched and is not always able to meet their needs in a timely and effective manner. This impression is reinforced any time people have to wait long hours to be seen in a crowded hospital emergency department, or whenever they hear of someone with suspected cancer waiting a long time for diagnostic and treatment procedures.

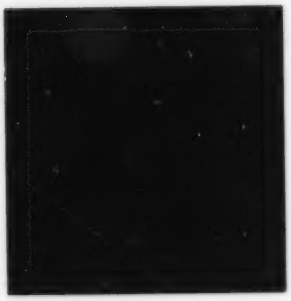
Making the health system sustainable and affordable over the long term means more than just putting the brakes on spending. It is also about keeping people healthy and providing them with the help and support they need to take good care of their health throughout their lives. Sustainability means that the system's human and physical resources must be used wisely. We need to continually improve the way the health system operates and maximize its efficiency and effectiveness. There is no single solution. Rather, we need to take action on many different fronts and at many different levels.

Since the year 2000, improvements have been made that have put Alberta on a solid foundation for the future. Albertans receive services through nine regional health authorities that are legislated to respond to the health needs of their residents through well planned and integrated health services. Regional health authorities operate hospitals and many other health services directly. They also contract with private providers for more accessible community-based services such as laboratory testing, surgical procedures, long term care and home care.

In May 2005, the provincial government hosted the Alberta Symposium on Health. The symposium provided a unique opportunity for representatives of Alberta's health regions, communities, health organizations and professional groups to exchange information and experience and to consult with international experts. Some of the important lessons learned at the symposium were: (1) there is no single solution to health care, but rather improvements must evolve over time, (2) improvements must focus on the patient and emphasize evidence-based outcomes, and (3) solutions must meet the expectations and values of the society in which they take place. Following the Alberta Symposium on Health, the Minister of Health and Wellness undertook a province-wide consultation throughout June 2005 and met with representatives of regional health authorities, municipalities and community organizations to discuss what can be done to improve Alberta's health system.

Based on what was learned, the Premier and the Minister announced, in July 2005, a series of action items in the *Getting on with Better Health Care* package. The action items identify ways for improving the health system in areas such as: disease and injury prevention, children's health, mental health, and the health needs of rural communities. They also included important strategies such as primary health care, in which the needs of patients are looked after by teams of professionals with different kinds of training and expertise; new quality standards for long term care; the use of new technology such as the electronic health record to improve communications and reduce error; increasing the number of health service providers and modernizing our pharmaceutical programs to make them more accessible, efficient and sustainable. These action items are a driving force for continued improvement in the health system.

To sustain this momentum, the first action item was to develop a Health Policy Framework to provide clear and consistent direction and to guide the future decisions of health system leaders. Following the initial release of the Health Policy Framework in February 2006, the Minister of Health and Wellness listened to a broad range of ideas from Albertans about the directions contained in the framework through meetings, correspondence, and the Internet. Albertans want to ensure timely access to health services and an adequate future supply of health service providers. Although Albertans generally agreed that there should be incentives for greater choice and innovation in the public health system, they had some concerns; for example, concern was expressed about the concept of allowing physicians to practice in both the public and private health system. They felt that allowing more private pay services could lead to two-tiered health care. Most Albertans also felt that there should be a strong emphasis on longer term solutions such as encouraging people to maintain their personal health and wellness.



This document, *Getting On With Better Health Care: Health Policy Framework (August 2006)*, is a result of listening to Albertans and responding to their suggestions and ideas. The eight directions of this revised Health Policy Framework provide a broad and flexible foundation for the organization and delivery of health care in Alberta, one that extends well beyond the services of hospitals and physicians. Its purpose is to lead the way toward a more sustainable, responsive and accessible health system that is based on a more holistic and comprehensive approach to care.

VALUES

1. Health care must be people-centered

The health system exists to serve the needs of people. It must be people-centered and recognize that individuals play the greatest role in supporting health and wellness for themselves, their families and their communities. The system must allow Albertans to make choices based on full and complete information. Individuals must be prepared to use the health system appropriately and responsibly.

2. Health care must meet quality standards

Albertans want to be confident in the quality of the health services provided to them. Quality means that services are people-centered and meet accepted standards of accessibility, appropriateness, effectiveness, efficiency and safety. Albertans expect to see effective processes for continuous quality improvement and the avoidance of error or harm.

3. Access to services must be timely and fair

Albertans recognize that every geographic location cannot provide all the health services that a person may require. Still, Albertans should have access to the services they need in other locations without undue delay. Timely and fair access to health services must take into account differing levels of clinical urgency. There must be no barriers to access based on a person's ability to pay.

4. Health system leadership must be accountable and fiscally responsible

Albertans expect their health system to be accountable, open and transparent in decision making and in the use of public funds. Albertans expect value for money and improved health outcomes for every dollar spent. Albertans also recognize that, in the interest of better health, the province must invest appropriately in education, social development, environmental protection and economic growth.

5. Albertans must be able to choose what is best for their own health and wellness

Health and wellness are lifelong pursuits. The overall health of Albertans is a major contributor to our economic prosperity and quality of life. Children must be encouraged to develop the resiliency, coping skills and lifestyles that support optimum health and vitality throughout their lives. The health system must provide Albertans with information and advice and support them in preventing disease and injury. Albertans should be able to choose the health services that best suit their needs and circumstances.

> The health system must be people-centered and recognize that individuals play the greatest role in supporting health and wellness, for themselves, their families and their communities.

DIRECTIONS FOR MOVING FORWARD

These policy directions for guiding the development of Alberta's health system reflect the principles of the *Canada Health Act* and take into account the values and beliefs of Albertans. Alberta's approach to health system renewal is based on learning from the best health systems in the world. We know that no country has managed to solve all their health-related issues and concerns. However, countries like France, Spain, Sweden, Australia and Switzerland have developed high-performing health systems because of their willingness to adopt flexible approaches.

Alberta's new approach to health policy is needed to guide the evolution of our health system in ways that are more sustainable and responsive to the values and expectations of Albertans. Health system leaders must be challenged to improve their performance and that of the health system as a whole. Alberta's approach to health system renewal will therefore be based on the following key directions.

> Alberta's approach to health system renewal is based on learning from the best health systems in the world.

1. Put the Health of Albertans First

The Challenge

There is always a concern that the interests of individuals may get lost in a large and complex system. Albertans want and deserve to be well informed and consulted on all matters pertaining to their health. They are ultimately responsible for taking good care of their health throughout their lives. Health is more than just the absence of disease. Most of the factors that determine health lie outside the jurisdiction of the health system. Early childhood development, safe workplaces, environmental protection, education, and economic prosperity play the biggest role in enabling people to stay healthy. Effective collaboration at every level of society is needed. The challenge is to ensure the interests of ordinary people are not overlooked when dealing with the problems of a large complex system. While it is important to address issues such as financial management, evolving technology and staff shortages, we must never lose sight of the ultimate goal: lifelong health and wellbeing. The health system must inspire the confidence and trust of those being served. People should always feel respected and treated as full partners in any decisions concerning their care and treatment. They should be given the pertinent information, and an opportunity to weigh the alternatives before any course of action is decided upon.

Health Link Alberta **received over one million calls last year.**

What We Have Done

Many Albertans are now using Health Link Alberta to get the information they need when faced with a health concern. Experienced nurses are available 24 hours a day to give accurate information and advice to help Albertans with their health questions and needs. Callers include people with questions about their own health or that of their family members and those looking for help in finding a family physician.

Beginning in 2006, people who have concerns or complaints about their care and treatment within the health system now have access to the services of the Alberta Ombudsman in addition to the complaint resolution processes that already exist in each region. The Ombudsman's role is to carry out a fair and independent investigation of complaints and to help the parties involved come to a satisfactory solution.

As a result of new standards recently introduced, residents of continuing care facilities in Alberta and their families will be actively involved in needs assessment and care planning. Continuing care residents will benefit from more personalized care that puts their needs as a unique person first. Greater efforts will be made to help residents improve their health and capability.

The Health Quality Council of Alberta, established in 2004, plays a strong and effective role in improving the quality of health services and reports directly to Albertans on health system performance. The Council works with government and regional health authorities on strategies to make sure Albertans are well served by the health system including identifying best practices and reviewing and monitoring health care quality, access, acceptability, appropriateness, effectiveness, efficiency and patient safety.

What We Plan To Do

Individuals will be encouraged to play an active role in improving their own health and in deciding on the most appropriate care. Alberta's training and education programs for all health professionals will emphasize the critical importance of making people feel that they are truly at the center of the health system. This will be reinforced through appropriate guidelines, standards and programs that emphasize patient empowerment, recognizing that the key to empowerment is patient and family knowledge and understanding. This will be accompanied by the establishment of care facilitator and system navigator services that will help patients with complex conditions navigate their way through the system.

> The Health Quality Council of Alberta was recently established as a statutory board, giving it more authority to improve the quality and safety of Alberta's health care system.

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There are approximately 100,000 Albertans receiving continuing care.

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2. Promote Flexibility in Scope of Practice of Health Professionals

An expanded scope of practice for pharmacists means Albertans will have more options on how they can receive the prescriptions they need.

The Challenge

All health professionals expect to have the opportunity to use their skills and training to their full extent in providing services to individuals. A modern health system requires highly skilled, diverse and flexible workers. The skills and training of health professionals have been expanded in recent years. More than one kind of service provider may be capable of performing a particular procedure or service. When we use the skills and training of health professionals to their fullest, people can get the care they need quickly from the most appropriate provider. The challenge is to remove the restrictions that prevent professionals from making clinical care and treatment decisions appropriate to their training and knowledge. We also need to make sure that all health professionals are trained to work in teams that share the responsibility for patient care. Working environments and

programs need to be developed that encourage more team-oriented models of care. However, when care is provided by a team rather than an individual professional the patient should always know who is directly responsible for their care. Physicians will continue to play a key role, but a team approach to care would allow them to spend more time on complex cases where their knowledge and skills are essential. This will allow pharmacists, nurse practitioners and other professionals to assume a greater role in the delivery of primary, preventive and chronic care. Fresh approaches to professional governance and leadership will be needed.

What We Have Done

Team approaches to care are central to the new Primary Care Networks that have been established throughout the province. Albertans served by these networks are benefiting from a more comprehensive kind of care and more personal attention to their needs. In addition to diagnosis and treatment services, these patients are given advice and support in making diet and lifestyle changes to enhance their overall health.

Progress has been made in extending the scopes of practice of 16 different health professions under the *Health Professions Act*. These health professionals are now able to practice to their full competency and increase the total number of health care services to Albertans.

The new Health Sciences Ambulatory Learning Centre (Edmonton Clinic) offers team care and training. It involves the University of Alberta faculties of medicine and dentistry, pharmacy, nursing, agriculture, rehabilitation medicine and physical education and recreation in combining teaching and research with advanced team-based approaches to health care.

What We Plan To Do

Alberta will continue to improve access to health services by promoting team approaches to care. Efforts will be made to ensure that team-based care is seamless and meets high standards of quality. Planning will continue for expanding multidisciplinary approaches to care, professional education, and training.

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There are 26 Primary Care Networks operating in Alberta communities involving 550 family physicians providing services to more than 700,000 patients.

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3. Implement New Compensation Models

Approximately 800 physicians in Alberta currently practice under part-time or full-time Alternate Relationship Plan agreements, and recent changes will make it possible for more physicians in Alberta to participate.

The Challenge

Compensation models play a large role in determining the way health services are provided. New compensation models must promote the best quality care for patients and be cost effective for the province. Health service providers are paid in a variety of ways. The majority of nurses are salaried employees but the majority of physicians are paid a fee for

each service covered by Alberta's health insurance plan. The current compensation model for physicians rewards the quantity but not the quality of care. New compensation models for health service providers should be linked to the achievement of health outcomes, for their participation in committee work and for contributing to teaching and research. The fee-for-service system is not well suited to a multidisciplinary care environment in which each member of the team shares in the responsibility for patient care. New compensation models also need to be aligned with evolving provider roles and their scope and type of practice. Changing compensation models and the incentives they create is a major challenge. Service providers could be compensated for a collection of services delivered as part of a continuing process of care. Paying for services in this manner would focus the efforts of providers on achieving defined health outcomes. Such collections of services may include: pediatric care, maternity care (pre- and post-partum care and delivery), diabetic care, primary care and continuing care.

What We Have Done

The eight-year agreement with the Alberta Medical Association and regional health authorities has allowed for some movement away from the fee-for-service system. New methods of compensating physicians under this agreement (Alternate Relationship Plans and Primary Care Networks) are allowing physicians to devote more time to the care and follow-up of their patients. These arrangements also allow physicians to be compensated for valuable teaching and research activities. Alternate Relationship Plans and Primary Care Networks are helping to attract needed physicians to Alberta.

What We Plan To Do

Alberta will continue to develop new professional compensation models and incentives to improve quality of care, efficiency and collaboration among health professionals. In addition, new methods of measuring health outcomes and improvements will be introduced. The use of Alternate Relationship Plans will be expanded as will the breadth and number of Primary Care Networks. Finally, a comprehensive strategy for paying health professionals, including physicians, will be developed.

4. Strengthen Interregional Collaboration

The Alberta Stroke Strategy gives Albertans from all nine health regions 24-hour access through their physicians to stroke treatment and consultation with specialists in the major centers.

The Challenge

Alberta is striving for a comprehensive, seamless, fully coordinated health system. The establishment of health regions has enabled better integration and continuity of care from one service provider to the next. Alberta's health authorities have created better coordination between services in hospitals and in the community. There are still, however, many challenges in providing Albertans with access to comprehensive and well coordinated health care. The challenge is to make sure that the boundaries of Alberta's nine health regions do not act as barriers to equal care for all Albertans. The fact that each region has its own budget and is responsible for its own staff recruitment, training and development and for providing the care and services needed by their residents reduces the opportunities and incentives for resources sharing among regions. Albertans who receive care in more than one region must feel they are part of a seamless provincial health system. Creating a fully coordinated health system will require referral networks between physicians and hospitals to be strengthened.

> Every Albertan will be included in the electronic health record, a system that is already being used by more than 17,000 health providers.

What We Have Done

Alberta has taken the first steps in developing a province-wide network for the diagnosis, care and rehabilitation of stroke patients and related research studies. Centers of excellence for care and research in specialized areas are providing Albertans access to the most advanced forms of care and treatment.

In northern Alberta, a Critical Care Line has been established which links rural physicians with specialists in the Edmonton area. In southern Alberta, the Calgary Health Region in partnership with rural regions and STARS air ambulance has established the Southern Alberta Regional Coordination Centre (SARCC). The Centre takes calls from rural physicians and assists them in arranging for hospital admission or consultation with a specialist. Both the Critical Care Line and SARCC have shortened the wait times experienced by rural patients for specialist referrals. In addition, patients in rural and remote areas are provided greater access to specialist services through the use of telehealth videoconferencing communications technology.

Alberta's health regions, primary care physicians and specialists collaborated on a province wide Hip and Knee Joint Replacement project. This pilot project redesigned the entire process of care from pre-surgical assessment to discharge planning. The process improvements and efficiency gains have dramatically reduced wait lists and wait times for hip and knee surgery. Alberta is leading the country in the development of a single province-wide electronic health record system (Alberta Netcare). This system is improving patient care by providing health professionals with quicker access to information on patient prescriptions, allergies, and lab test results.

What We Plan To Do

Alberta will develop a provincial health service plan and establish shared service networks throughout the province. Alberta will continue to develop specialized health institutes, which combine leading edge research with advanced clinical care. Consideration will be given to providing a portion of health authority funding in the form of designated envelopes for shared programs and services.

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5. Reshape the Role of Hospitals

The Edmonton Clinic will play a significant role in Alberta's health-reform strategy and position the capital region as one of North America's leading health services delivery and academic hubs.

The Challenge

Alberta has invested billions of dollars in modern health care facilities, ranging from small health centers to large hospitals. It is important to use all these facilities in the best possible way to serve the health needs of Albertans. Most urban and rural hospitals had their origins in the 1950s or earlier when Alberta's health system was less complex and less technologically advanced. Hospitals have since had to adapt to increasing levels of specialization and technology. While urban hospitals face overcrowding and increased wait times, rural hospitals may not be well utilized for a variety of reasons. As a result, some rural hospitals have sought to shift their focus to other areas of unmet need, such as primary care and long term care. The first challenge is to realize that urban hospitals do not have to be all things to all people. The role for urban hospitals needs to become more focused and selective. They should become centers of specialization concentrating on advanced levels of services. Urban hospitals should transfer some of their services to community-based

settings which can provide more efficient, timely and convenient service. Rural hospitals face a different challenge. They may have underutilized space and equipment that could be put to better use. Their programs and services need to be more closely linked to urban hospitals. They could offer additional capacity for follow-up, rehabilitative or convalescent care. In addition, smaller rural hospitals could focus on providing a range of primary care by offering a variety of multidisciplinary services to the surrounding communities.

What We Have Done

The new South Calgary Health Centre (Calgary Health Region) offers patients a variety of health services, including urgent care, public health, mental health, speech language pathology, rehabilitation and dialysis. It also provides a variety of specialty clinics such as home care, family planning, pediatric asthma and diabetes education in a community setting.

The rural Westview health facility in Stony Plain (Capital Health) has developed a shared care maternity program which uses midwives in the care of low risk obstetrical patients. This program has resulted in an increase in the number of deliveries from 18 to roughly 400 per year. This has reduced the pressure on maternity beds in large Edmonton hospitals.

The hospital in Redwater (Capital Health) has converted some of its surplus acute care space into long term care beds. This allows elderly residents to remain in their home community as they age.

What We Plan To Do

Province-wide service planning will include options for changing the role of urban and rural hospitals. Such role changes may require shifting some day surgery and ambulatory care services to community settings, delivering more services through private surgical facilities, linking some rural hospitals to urban hospitals for the provision of less complicated acute or follow-up care and refocusing small rural hospitals to centers of multidisciplinary primary care. Albertans will be able to obtain better access to urgent and ambulatory care for less serious conditions.

6. Define Publicly Funded Health Services

The Health Benefit Design Options report (2006) shows the costs of health services rising at unsustainable rates and they will become more difficult to control as time progresses.

The Challenge

Alberta needs clear definitions on how the province determines what will be paid for by public health care. Alberta spends over one-third of the provincial budget ($10 billion a year) in public funds on health care and faces continuing pressure to spend even more. Managing expenditure growth within the public health system is not an easy task. Simply putting the brakes on spending and restricting access to services is not the answer. The challenge is to develop a clear criteria and a practical way of determining what should be paid for using public funds. We need to see evidence of real value and effectiveness before agreeing to add more services and drugs to the publicly funded benefits. When adding new services we also need identify what existing services will be replaced or used less extensively.

What We Have Done

To help manage the cost of prescription drugs, Alberta participates in Canada's Common Drug Review process. This process provides a more consistent and rigorous review of new drugs, so that public drug benefit coverage is directed to the most cost-effective and beneficial drugs. In addition, Alberta has established an Expert Committee on Drug Evaluation and Therapeutics. This committee examines the scientific evidence for existing drug products that are being considered for public funding. These processes help to ensure that Albertans get the best in terms of safety, effectiveness and value for money.

Decisions to publicly fund new health services or technologies are made on advice of the recently established Alberta Advisory Committee on Health Technologies. The Committee weighs all the scientific evidence when providing recommendations as to whether public funding should be used for new technologies and services.

What We Plan To Do

Alberta will strengthen existing decision-making processes for determining which new health services and products should be publicly funded. Decisions on provincial funding for new health services will be informed by scientific evidence and will allow for the substitution of new services and products proven to be of superior value and effectiveness.

The Challenge

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If expenditures continue at the same rate of growth, the cost of health care in Alberta will quadruple from $10 billion to $48 billion by 2025.

What We Have Done

To help manage the cost of prescription drugs, Alberta participates in Canada's Common Drug Review process. This process provides a more consistent and rigorous review of new drugs, so that public drug benefit coverage is directed to the most cost-effective and beneficial drugs. In addition, Alberta has established an Expert Committee on Drug Evaluation and Therapeutics. This committee examines the scientific evidence for existing drug products that are being considered for public funding. These processes help to ensure that Albertans get the best in terms of safety, effectiveness and value for money.

Decisions to publicly fund new health services or technologies are made on advice of the recently established Alberta Advisory Committee on Health Technologies. The Committee weighs all the scientific evidence when providing recommendations as to whether public funding should be used for new technologies and services.

What We Plan To Do

Alberta will strengthen existing decision-making processes for determining which new health services and products should be publicly funded. Decisions on provincial funding for new health services will be informed by scientific evidence and will allow for the substitution of new services and products proven to be of superior value and effectiveness.

7. Expand Workforce Capacity and System Capability

Since government began the bursary program in 1996, the ***Aboriginal Health Careers Bursary*** has awarded more than $2 million to 483 Aboriginal students.

The Challenge

It is important to make sure that all facilities across Alberta have the right number and type of health care service providers to meet the needs of Albertans. Alberta's health system has limited capacity and human resources. In some cases, shortages of health professionals have resulted in longer wait times for needed services. The challenge is to ensure that there is a sufficient supply of well-trained health service providers to meet Alberta's growing needs. We need to increase our understanding of the factors that contribute to success in recruitment and retention and the

factors that contribute to stress, burnout and early departure from the workforce. Another challenge is to create sufficient opportunities for on-the-job training and mentoring for newly graduated professional staff. Finally, there is the challenge of providing enough health workers to serve the needs of rural and remote areas of the province and for providing culturally appropriate care to Aboriginal communities and ethnically diverse populations.

What We Have Done

By offering special bursaries and incentives Alberta has been successful in attracting Aboriginal students to studies in health-related professions. This has helped to ensure greater access to health services for Aboriginal communities.

Alberta has added additional clinical training positions for post-graduate medical students and foreign-trained doctors. This means that the number of physicians available to serve the needs of Albertans will be increased.

What We Plan To Do

Alberta will implement and evaluate pilot projects aimed at making more productive use of the time and skills of health professionals. More clinical training opportunities will be provided in both public and private facilities in cooperation with professional training institutions. Training programs in various disciplines will be expanded and, where possible, virtual campus and distance learning will be expanded. Incentives will be provided to attract students to clinical training and employment in rural communities. Alberta will also increase efforts at attracting high school students to health careers.

> Over the past five years Alberta has had the highest net increase in physicians (800) of any province in Canada.

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Alberta is investing $3 million for up to 14 additional residency seats for foreign-trained doctors now living in the province.

What We Plan To Do

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8. Maximize Benefits from Innovation and Research

The 'Edmonton Protocol' was developed to transplant healthy islet cells into people with Type 1 diabetes. The transplantations have shown levels of success that are unprecedented in the field of islet transplantation surgery.

The Challenge

It is important to derive the maximum benefit from innovative research and health care ideas. Health care occupies a prominent place in the economic life of Alberta. Not only do health services contribute to optimum health and wellbeing, they make a major contribution to Alberta's economic diversity and prosperity. The health system provides important learning and business opportunities. International trade in drugs and medical technologies has the potential to play a significant role in Alberta's future

development. The challenge is to develop Alberta's capacity to benefit from innovative research and take full advantage of ideas and knowledge generated in Alberta. Alberta has been testing out new ideas and approaches and implementing pilot projects. This has allowed us to learn as we go. As a result Alberta has achieved notable success in building a more diversified knowledge-based workforce and economy. Our commitment to research through such organizations as the Alberta Heritage Foundation for Medical Research benefits not only health care, but other sectors such as industry, environmental protection and education as well. The bottom line is that Alberta has a lot to offer to the rest of Canada and the world through its excellent health services and research.

What We Have Done

Alberta has achieved international recognition for clinical research into the successful transplantation of islet cells. This research, known as the Edmonton Protocol, has been shown to be highly effective in the treatment of insulin dependent diabetes.

Research into injection drug use has filled important information gaps in the area of population health. This research has sparked innovative health promotion and prevention programs for drug users.

The Alberta Heritage Foundation for Medical Research has established the ForeFront Program. This program supports the development of the health industry in this province and the application of health research through education, mentorship and the commercialization of technological innovations.

What We Plan To Do

Alberta will foster a climate in which new ideas and concepts are researched, tested and put into practice as part of normal business. Alberta will pursue a research and development strategy that will achieve closer relationships among the research community, health services providers and system decision makers. Universities and research institutes will be encouraged to design and implement innovative models of care and pilot projects. Alberta will also promote the development of intellectual property and commercialization ventures.

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The Alberta Heritage Foundation for Medical Research has funded over 250 projects in excess of $20 million.

EMBRACING THE FUTURE

In Alberta, we are at a crossroads, poised and ready to make critical policy decisions that will guide the future evolution of our health system. Alberta has an extraordinary opportunity to lead the country and demonstrate how modern health systems can perform and serve the needs of citizens without imposing an unsustainable financial burden. Albertans have a right to feel confident in their future. Albertans need to become more actively involved in making decisions and exploring options and choices about their health and health care.

This Health Policy Framework is designed to shape future policy decisions by providing clear and consistent direction based on the goals, values, and expectations of Albertans. It continues the *Getting on with Better Health Care* action items that were launched by the Alberta Government in July 2005. The combination of decisive action and strategic thinking creates the drive and momentum necessary for positive change.

We know that having a quality health system requires investment. The decisions we make today will have long term effects on tomorrow's health system. Nothing is more important than ensuring its sustainability for generations to come.

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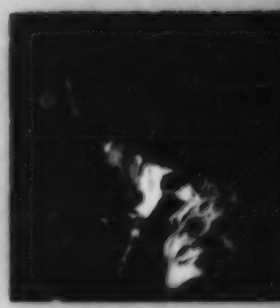
DID YOU KNOW...?

- In Alberta $10.3 billion will be spent on health in 2006/2007, approximately one-third of the provincial budget.
- Alberta has the highest per capita health spending in Canada – $4,820 per person per year.
- Nearly two-thirds of the provincial health budget is provided as operating grants to health authorities.
- Roughly 70 per cent of health authority budgets pay for the salaries and benefits of approximately 100,000 health care providers.
- The number of physicians currently registered in Alberta is 6,279 which is up by 1,219 from the year 2000.
- According to a 2003 Statistics Canada survey, Albertans on average are more physically active than other Canadians.
- In Alberta, life expectancy for males is 77 years and 82 years for females. However, not all of those years are lived in good health.
- Alberta's population is aging. The average age of Albertans in 2004 was 36.1 years of age compared to 29.5 years of age in 1971.
- Albertans have access to a full range of hi-tech procedures, such as organ transplants, neurosurgery and cardiac surgery, without having to leave the province. Currently, Alberta performs 11,000 such procedures a year, an increase of 4.5 per cent each year over the past five years.
- Average wait times for surgical and diagnostic procedures are being reduced. For example, 90 per cent of people waiting for hip replacement surgery have their operation within 48 weeks, a reduction of 7 weeks compared to the previous year. Ninety per cent of those waiting for Computed Tomography (CT) scans obtain the procedure within 6 weeks, 4 weeks sooner than the previous year.



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